

County Borough of Burton upon Trent

**EDUCATION COMMITTEE** 

## ANNUAL REPORT

UPON THE

SCHOOL HEALTH SERVICE FOR THE YEAR 1971

BY

ROBERT MITCHELL B.Sc., M.B., Ch.B., D.P.H., M.F.C.M.

PRINCIPAL SCHOOL MEDICAL OFFICER





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### Contents

| Introduction    | • •                       |            |         |         |           |             |     |     | 5        |
|-----------------|---------------------------|------------|---------|---------|-----------|-------------|-----|-----|----------|
| Staff           |                           |            | • •     |         |           |             |     |     | 7        |
| Staff Changes   | • •                       |            |         |         | • •       |             | • • |     | 9        |
| Medical Inspe   | ction                     |            | • •     |         |           |             | • • |     | 9        |
| Findings of the | e Medical In              | spection   | n and T | Γreatm  | ent of I  | Defects     | :   |     |          |
| (a) Gene        | eral condition            | 1          |         |         |           |             |     |     | 10       |
| (b) Nose        | and Throat                | defects    | ;       |         |           |             |     |     | 11       |
| (c) Ear         | defects                   |            |         |         |           |             |     |     | 11       |
| (d) Eye         | and Visual d              | efects     |         |         |           |             |     |     | 11       |
| (e) Orth        | opaedic defe              | cts        |         | • •     |           |             |     |     | 12       |
| (f) Dise        | ases of the S             | kin        |         |         |           |             |     |     | 12       |
| (g) Spee        | ch Therapy                |            |         | ••      |           | ••          |     |     | 13       |
| (h) Infes       | station with V            | Vermin     |         |         |           |             | • • |     | 15       |
| (i) Foot        | defects                   | • •        | • •     | • •     |           | • •         |     |     | 15       |
| (j) Enui        |                           |            |         | ••      |           | • •         | • • | • • | 15       |
| (k) Repo        | ort of the Pri            | ncipal 3   | School  | Denta   | l Office: | r           | • • | • • | 16       |
| Handicapped I   | Pupils                    | • •        | • •     | • •     | • •       | • •         | • • | • • | 17       |
| Child Guidano   |                           |            | • •     | • •     |           | • •         |     |     | 17       |
| Infectious Disc |                           |            |         |         |           |             | • • | • • | 18       |
| B.C.G. Vaccin   |                           |            | • •     |         |           | • •         | • • | • • | 19       |
| Deaths of Chil  | ldren of Scho             | ool Age    |         | ••      |           | • •         | • • | • • | 19       |
| Minor Ailmen    | ts Clinic                 | • •        | • •     | • •     |           | • •         | • • | • • | 20       |
| Employment of   |                           |            | • •     |         |           |             |     |     | 20       |
| School Meals    | Service and I             | Free M     | ilk Sch | eme     | • •       | • •         |     |     | 20       |
|                 |                           |            |         |         |           |             |     |     |          |
|                 |                           |            |         |         |           |             |     |     |          |
|                 |                           |            |         |         |           |             |     |     |          |
|                 |                           |            |         |         |           |             |     |     |          |
|                 | S                         | TATIS      | TICA.   | L TA    | BLES      |             |     |     |          |
| Children        | on Roll—                  |            |         |         |           |             |     |     | 21       |
|                 |                           | 1-         | ••      | ••      | ••        | ••          | ••  | • • | 21       |
|                 | ntained Sch               |            |         | ion     |           |             |     |     | 21       |
|                 | Table 1.—M<br>Table 2.—In |            | _       |         | · ·       | • •         | • • | • • | 21<br>22 |
|                 | Table 2.—In               |            |         |         |           | <br>nection | • • | • • | 23       |
|                 | Table 3.—Do               |            |         | y Meu   |           | _           |     | • • | 25<br>25 |
|                 | Table 4.—Ti               |            |         |         |           | ··<br>ient  | • • | • • | 25<br>27 |
|                 | Table J.—Di               | circal III | isheen( | Jir anu | Ticatii   | ICIIL       |     | • • | 21       |

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# Annual Report of the Principal School Medical Officer

#### For the Year 1971

To the Chairman and Members of the Education Committee.

I have the honour to present my Annual Report for the year 1971.

There were no serious outbreaks of infectious disease in school children during the year. There were 138 cases of measles compared with 122 cases in 1970. There was no case of scarlet fever. There were 10 cases of whooping cough compared with 7 cases in 1970. There was one case each of meningitis, food poisoning, and non-pulmonary tuberculosis.

The infestation of scabies is still prevalent. 106 cases were treated, compared with 81 in 1970. 204 children were found to be infested with head lice compared with 150 in 1970. This increase is disappointing despite the continued vigilance of the School Nurses. The current hair fashions of both sexes does not help in the eradication of infestation by head lice.

The scheme for B.C.G. vaccination against tuberculosis for school children between 11 and 15 years of age continues to have good support by parents. During the year 898 children were Heaf tested and of these 49 were found to be positive and 788 negative reactors received B.C.G. vaccination.

Again I have to report that all attempts to recruit an additional full time Dental Officer were unsuccessful. Mr. A. Noel Stannard is to be congratulated on the work he has done during the year with only part time assistance from a Dental Officer who was only available for the first four months of the year, plus one half day session per week provided by a local Dental Surgeon.

I also have to report that we have been unable to recruit an assistant for Mr. F. Brook, F.C.S.T., our Senior Speech Therapist.

I wish to express my thanks to the Education Committee for their support during the year, to the Director of Education and his staff, to the Heads of the Schools for their valuable assistance, and to Dr. G. M. Curtois, who has been largely responsible for the preparation of this report.

I am,

Your obedient servant,

ROBERT MITCHELL,

Principal School Medical Officer.

#### Staff of the School Health Service

Principal School Medical Officer:

ROBERT MITCHELL, B.Sc., M.B., Ch.B., D.P.H., M.F.C.M.

School Medical Officers:

G. M. CURTOIS, M.R.C.S., L.R.C.P., D.P.H.

P. K. RAY, M.B., B.S., D.P.H. (Cal.)

Principal Dental Officer:
A. NOEL STANNARD, L.D.S.

Consultant Anaesthetist:

GEORGE QUAYLE, M.R.C.S., L.R.C.P., F.F.A.R.C.S. Eng., D.A. (Part-time)

Dental Officers (Part-time):

ROY THOMPSON, L.D.S., B.D.S.

MRS. S. BUCKLEY, L.D.S. (Resigned 19/5/71)

Senior Speech Therapist: F. BROOK, F.C.S.T.

Orthoptist:

MRS. L. GANNON (Part-time) (Resigned 30/9/71)

MISS C. MURRAY (part-time)
(Commenced 1/10/71)

School Nurses:

MRS. M. T. POPIKAS, S.R.N., S.C.M. MISS O. D. MARKS, S.R.N.

Dental Auxiliary:
MISS C. DODD
(Resigned 26/3/71)
MRS. EADIE
(Commenced 19/4/71)

Dental Attendants:

MRS. E. CLAMP

MISS C. HOWELL

(Resigned 1/1/71)

MRS. P. J. WOODLOCK

(Commenced 4/1/71, Resigned 31/3/71)

MISS M. S. POSTLE

(Commenced 10/5/71)

Clerks:

MRS. J. BENTLEY
MRS. M. B. M. HAMP (Part-time)
MRS. E. MOORE

Cleansing Assistant (Part-time):
MRS. I. TAYLOR

- 1. Staff Changes. Mrs. S. Buckley, L.D.S., part-time Dental Officer, resigned in May 1971. Mrs. L. Gannon, Orthoptist, who has been on the staff at the School Clinic for some years resigned. Her place was taken by Miss C. Murray, seconded from the Burton District Hospital Centre. There were no other changes in the staff during the year.
- 2. Medical Inspections. The School Medical Officers have carried out routine examinations of infants during their first year at school.

In Junior schools, inspections were once again confined to the reinspection of children with known defects and to such children as were referred with suspected defects by school staff or school nurses to the medical officer.

At the school leaver stage, all children were seen, weighed and measured and had their vision and colour vision tested by the school nurses. As a result of this a number of children were brought forward for a more detailed examination. School staff and parents also requested that a further proportion of them be examined for suspected defects by the School Medical Officers. Parents of all children in this age group are offered an appointment with the School Medical Officer, but only a small number of parents availed themselves of this opportunity. An increasing number of children in this age group are seen each year in connection with continental journeys and other courses of a residential or camping nature arranged by their respective schools.

The school nurses visited each school at least once a term for the purpose of performing either vision testing and/or head inspections. Any defects noted at these visits are reported to the School Medical Officers for appropriate action.

Visits have also been made to schools by the Principal Dental Officer and to a few schools by the Senior Speech Therapist.

A number of children are referred each year to the school medical service by parents, G.P.s., school staff and other interested bodies.

As in previous years a number of children have been referred with psychological problems. We are very fortunate in Burton upon Trent, however, in being able to call upon Mr. Henry, our Educational Psychologist, whose assistance in solving psychological problems has proved most useful.

The attendance of parents at routine medical examinations of school entrants remains good. At a few schools, however, the attendance leaves much to be desired and, unfortunately, it is usually in the cases where the parents do not attend that there is most need for consultation between doctor and parent. This often necessitates making repeated appointments at the School Clinic and school nurses and welfare officers having to pay repeated visits to the homes.

There has been a shortage of accommodation at the School Clinic for many years this has at last been remedied by the closing of the Old Technical College next door. The Speech Therapy Department now has very adequate premises modified, re-decorated and furnished to the requirements of Mr. F. Brook, Senior Speech Therapist. A quiet room at the back of the building has also been converted for audiometry. A new portable Camplex Audiometer has been provided and taken into use by School Doctors and school nurses. These changes have proved beneficial both to patients and staff at the School Clinic and have made available a much needed additional consulting room for the Assistant Medical Officer.

Accommodation in schools remains good, in fact most schools have a special medical room which proves most useful for routine medical examinations, vision testing and head inspections. They are more important than ever now that so many preventive vaccinations are carried out in the school.

I am happy to say that co-operation between the Schools, Clinic Staff and Head Teachers and their Staff is as good as ever, and is of much assistance in carrying out routine inspections and immunizations which have become part of every school-child's life.

## 3. Findings of the Medical Inspection and Treatment of Defects.

(a) General Condition. On examination, the children are divided into two categories: "Satisfactory" and "Unsatisfactory", according to their physique, height-weight ratio and present state of health.

The general condition of entrants during 1971 is shown below:

Satisfactory Unsatisfactory 100% NIL

On the whole, the standard of nutrition is high and the general condition of the children can be regarded as satisfactory.

With the co-operation of the General Practitioners, Specialist opinion and care has been obtained where considered desirable. Co-operation with the Burton District Hospital Centre has also been well maintained, and copies of reports of all school children seen by the Specialists at the Hospital are received by the School Medical Service. This is a great help to the Medical Officer concerned.

(b) Nose and Throat Defects. Medical Inspection revealed 175 defects of the nose and throat, the great majority being either enlargement of tonsils and adenoids or persistent nasal catarrh.

We are indebted to Mr. Hingorani, Consultant E.N.T. Surgeon at the Burton District Hospital Centre and his staff in dealing with these problems, in fact 420 school children were seen and treated at the Burton District Hospital Centre, an increase of 289 on the previous year.

(c) Ear Defects. During 1971, 7 children from Burton upon Trent were in special residential schools for deaf or partially hearing children. One boy was in Needwood School for the Partially Hearing, and three boys and three girls were in the Derby Royal School for the deaf. During the year 4 pupils were equipped with a hearing aid, bringing the number of children in Burton equipped with such apparatus to 9. With hearing aids these children have been able to continue their education at ordinary schools in the Borough.

A Peripatetic teacher of the deaf was made available for a few months through arrangements made by the Director of Education.

(d) **Defects of Vision.** The special Eye Clinic provided at Burton District Hospital Centre has continued to function well.

Miss C. Murray, Orthoptist, seconded on a sessional basis from the Burton District Hospital Centre has been of great assistance. In addition to her work at the School Clinic she now carries out sessions in the schools. In all she saw 556 cases during the year. Out of these she referred 187 to the Consultant Ophthalmologist at the Burton District Hospital Centre for further opinion and treatment where necessary. 2,576 children had their vision tested by the School Nurses in schools and 305 cases were referred to the Ophthalmologist. 112 school children had spectacles prescribed for them during 1971.

The Keystone Vision Tester taken into use last year continues to be in much demand as a quick and accurate means for testing children's visions, colour vision and helps to confirm the presence of squints.

As previously, the parent of a child found with defective vision is given the option of attending his or her own doctor, or the Eye Clinic for school children held at the Burton District Hospital Centre, or to attend an optician of his or her own choice.

(e) Orthopaedic Defects. Children suffering from orthopaedic abnormalities requiring active treatment are referred to the Burton District Hospital Centre, with the assent of the child's own doctor.

Advice is given at the School Clinic for minor defects.

As previously, flat feet and knock knees are the commonest orthopaedic defects found in school children, often associated with obesity.

88 children were found with orthopaedic defects at the school routine examinations.

(f) **Diseases of the Skin.** As usual scabies was the most prevalent skin condition seen at the School Clinic. 106 cases were treated during the year.

The number seen in the previous ten years were:

The routine treatment consists of a series of three baths followed by the application of Benzyl Benzoate Emulsion which is given to all affected patients. Children of school age are excluded from school until free from infection when a fitness certificate is issued by the School Medical Officer.

It is not always possible to get all the members of an infected family to attend for treatment, but it has been achieved in the majority of cases. This has proved most useful in preventing the children being re-infected at home, often a problem in the past.

There has been an increase in the number of cases of scabies treated in the School Clinic last year. This number does not necessarily reflect an increase in the overall incidence of this disease in Burton, but is due to an increase in the number of cases referred to the School Clinic by their own doctors.

Only 2 cases of impetigo were treated at the School Clinic during the year.

(g) **Speech Therapy.** There have been no applicants for the vacancy of full or part-time Speech Therapist and Mr. F. Brook, F.C.S.T., has been without assistance during the whole of the year. He reports as follows:

There has been no significant changes in the number of children referred for Speech Therapy during the year. The one problem appears to be insoluble and that is the provision of effective treatment, or indeed, any treatment for the children whose parents persistently fail to co-operate through non-attendance at the Speech Clinic. The help of Head Teachers and School Welfare Officers is sought before any case is closed. In some parts of the country this problem is overcome to some extent by speech therapists working within the schools but this means having sufficient staff and suitable rooms available. Most schools are without spare rooms that are sufficiently free from interruptions and noise to permit the speech therapy being effective.

An Intensive Course for Stammerers was held during the first two weeks of December. Eight male stammerers aged from  $15\frac{1}{2}$  to 20 years from areas outside the County Borough benefited from the treatment they received. Preliminary reports have been circulated and show that an appreciable measure of improvement in fluency and confidence was achieved in all the patients. The purpose of the Course was two-fold (i) to assess the merits of intensive methods of treatment as compared with once weekly appointments and (ii) to assess the value of new methods of treatment which have originated from work carried out during the year by the Senior Speech Therapist. It is expected that further courses will be held from time to time.

F. BROOK, F.C.S.T.,

Senior Speech Therapist.

| Number     | of children treated: Boy                | 's                                    |     | 162 |       |
|------------|---|---------------------------------------|-----|-----|-------|
|            | Gir                                     | ls                                    |     | 74  |       |
|            |   |                                       |     |     |       |
|            |   |                                       |     | 236 |       |
|            |   |                                       |     |     |       |
| (a)        | Stammerers                              |                                       |     | 30  |       |
| (b)        | Defects of articulation                 |                                       |     | 152 |       |
| (c)        | Delayed Language/Speed                  | ch Development                        |     | 36  |       |
| (d)        | 01 0 0 1                                |                                       |     | 7   |       |
| (e)        | 77-1 did                                |                                       |     | 2   |       |
| (f)        | Supra Bulbar Pareisis .                 |                                       |     | 1   |       |
| (g)        | Articulatory dyspraxia                  |                                       |     | 4   |       |
| (h)        | Speech defect associated                | with hearing loss                     |     | 4   |       |
| •          |   | <u> </u>                              |     |     |       |
|            |   |                                       |     | 236 |       |
|            |   |                                       |     |     |       |
| Disabass   | <b>.</b>                                |                                       |     |     |       |
| Discharge  |   |                                       |     | 40  |       |
| Adju       |   | • •• ••                               | • • | 49  |       |
|            | y adjusted                              | · · · · · · · · · · · · · · · · · · · | • • | 4   |       |
|            | ljusted (chiefly because of co-operate) | or parents madinty                    | ιο  | 4   |       |
|            | ventuated (e.g. chiefly                 | those who made                        | ••• | 4   |       |
|            | spontaneous recovery whi                |                                       |     | 4   |       |
|            | sferred, e.g., to resider               | _                                     |     | 4   |       |
|            | Educational Psychologist                |                                       | ισ  |     |       |
| Advi       | •                                       |                                       | ••  | 16  |       |
| MUVI       | seu                                     | • • • • • •                           | • • | 10  |       |
|            |   |                                       |     | 77  |       |
|            |   |                                       |     |     |       |
|            |   |                                       |     |     |       |
| Total atte |   |                                       | • • | • • | 1,392 |
|            | roll receiving treatment a              |                                       | • • | • • | 144   |
|            | ildren on waiting list at 3             |                                       | • • | • • | 34    |
|            | ildren referred during ye               | ar                                    | • • |     | 101   |
|            | 0 1                                     |                                       | • • | • • | 77    |
|            | ildren on waiting list at 3             |                                       | • • | • • | 43    |
|            | ildren receiving treatmen               | t at 31st Dec., 197                   | I   | • • | 159   |
|            | hool visits made .                      |                                       | • • | • • | 14    |
| No. of ch  | ildren seen during school               | visits                                | • • | • • | 149   |

(h) Infestation with Vermin. The total number of examinations by School Nurses during 1971 was 26,512. 204 persons were found to be infested with vermin some of whom were in a generally dirty condition which was a marked increase on the previous year. The number of exclusions increased also from 81 in 1970 to 94 in 1971. The services of the Cleansing Assistant every morning during term time, and occasionally during the holiday periods, has been of great assistance.

Treatment for infested and dirty children is available at the School Clinic. Many children are allowed to continue attending school, provided that they also attend regularly at the School Clinic for any necessary treatment. A child who is heavily infested, who has scabies or impetigo, or is so dirty as to be offensive to others, or does not attend the School Clinic for treatment, is excluded from school until certified fit to resume attendance by the School Medical Officers. During 1971 it was found necessary to issue 2 Cleansing Notices, nil Cleansing Orders.

- (i) Plantar Warts. The number of children attending the School Clinic for treatment of this painful complaint showed a decrease from 153 cases in 1970 to 125 cases during 1971. The routine treatment with Chlorosal proved satisfactory in the majority of cases. The remainder were treated with Salycilate paint, although this method of treatment needed to be fairly prolonged to achieve a satisfactory result.
- (j) Enuresis. Treatment with the buzzers was still being used in carefully selected cases of enuresis. In all 43 cases have been investigated by the School Nurses during the year, and of these 36 were found to be suitable for a trial with a buzzer. Of these 23 were cured; 1 failed to respond; and 12 were still under creatment at the end of the year. From the experience gained over the past years with this type of treatment, it would seem that alarm buzzers have a definite part to play in the treatment of this distressing condition. It is important, however, that full co-operation is obtained from both the affected children and their parents, and it is often lack of this essential co-operation which is found to be a most significant factor in the failure of treatment. At the end of the year, 1 child was still awaiting investigation.

#### Report of the Principal School Dental Officer

The year ended with the whole-time Dental Officer Equivalent (including the Principal Dental Officer) at 1.1 plus one Dental Auxiliary. The other staffing changes which have occurred are recorded elsewhere. Advertisements for full-time professional staff have produced little response.

The overall pattern of Inspection and Treatment of School Children has continued on similar lines to previous years. The concentration of school inspections has been in Infant and Junior Schools. During these school inspections the Dental Auxiliary has given talks and demonstrations in the school in question on Dental Health and Hygiene. School Inspections seem to activate many parents into the realisation that Oral Health is a necessary part of modern living. Some, no doubt, wait and wonder why these inspections do not occur more frequently, they fail to realise this cannot occur without the full complement of professional staff to cover the school population. Due to this shortage there is an increased demand on the time of employed Officers for "relief from pain" thus the time available for a more constructive and conservative service is not available.

General Anaesthetics continue to be administered by the Consultant Anaesthetist, Deputy Medical Officer of Health and Assistant Medical Officer of Health.

The arrangement whereby Dental Appliances are processed by the Technicians attached to the Burton and District Hospital Centre continues as previously.

A. N. STANNARD, L.D.S.,

Principal School Dental Officer.

4. Handicapped Pupils. The distribution of Handicapped Pupils in this area is shown in the following table.

| Handicap  | Attending<br>special<br>School         | At<br>ordinary<br>School         | At<br>no<br>School | Total not<br>attending<br>special<br>School |
|---|--|----------------------------------|--------------------|---|
| Blind Partially Sighted Deaf Partially Hearing Delicate Educationally Sub-normal Epileptic Physically Handicapped Maladjusted Speech Defect | 1<br>6<br>1<br>2<br>185<br>1<br>8<br>7 | 1<br>6<br>113<br>14<br>35<br>236 |                    |   |
|   | 211                                    | 405                              | 5                  | 410   |

Ascertainment of Educationally Sub-normal Children was continued throughout the year. 92 children were assessed during 1971 with the following results:—

| Children examined and found E.S.N.:-    |      |        |
|---|------|--------|
| (formally ascertained)                  | <br> | <br>37 |
| (informally ascertained)                | <br> | <br>32 |
| E.S.N. Children re-examined             | <br> | <br>15 |
| Children examined and found maladjusted |      | <br>2  |
| S.S.N. re-examined and found E.S.N.     | <br> | <br>6  |

Bitham School for E.S.N. children has proved most successful and has shown that there is a real need for a larger school to cope with all the children in Burton upon Trent who are in need of special educational treatment.

Child Guidance Clinic. The Child Guidance Clinic at Lichfield has again proved most useful. In all 15 cases from Burton upon Trent have been seen by Dr. Baker.

- 5. Infectious Diseases. The revised schedule for vaccination and immunization of school children introduced last year has continued. Children at school entry being offered Diphtheria/Tetanus antigen together with oral polio vaccine as reinforcing doses. Vaccination against German Measles was introduced.
- B.C.G. vaccination is offered to children between 11 and 13 years of age. Finally children are offered a reinforcing dose of oral polio vaccine and tetanus toxoid on leaving school.

The number of children immunised by the School Health Service during 1971 was as follows:

| (1)  | Number of children who received a full course of  |     |
|------|---|-----|
|      | Diphtheria/Tetanus antigen                        | 102 |
| (2)  | Number of children who received a reinforcing or  |     |
|      | booster dose of Diphtheria/Tetanus antigen        | 469 |
| (3)  | Number of children who received a full course of  |     |
|      | Diphtheria antigen                                | 1   |
| (4)  | Number of children who received a reinforcing or  |     |
|      | booster dose of Diphtheria antigen                | 21  |
| (5)  | Number of children who received a reinforcing or  |     |
| ` ′  | booster dose of Polio/Tetanus antigen             | 498 |
| (6)  | Number of children who received a reinforcing or  |     |
| ` ,  | booster dose of Polio antigen                     | 565 |
| (7)  | Number of children who received a full course of  |     |
|      | Tetanus antigen                                   | 5   |
| (8)  | Number of children who received a reinforcing or  |     |
|      | booster dose of Tetanus antigen                   | 4   |
| (9)  | Number of children receiving Measles immunisation | 6   |
| (10) | Number of children receiving German Measles       |     |
| ` /  | immunisation                                      | 369 |

The number of cases of Infectious and other Notifiable Diseases occurring in School children during 1971 was as follows:—

|                            |     |     | Number   | Admitted    |
|----------------------------|-----|-----|----------|-------------|
| Disease                    |     |     | notified | to Hospital |
| Measles                    | • • |     | 138      | -           |
| Meningitis                 | • • |     | 1        | 1           |
| Whooping Cough             | • • | • • | 10       | _           |
| Food Poisoning             | • • | • • | 1        | -           |
| Non-Pulmonary Tuberculosis | • • |     | 1        | 1           |

6. B.C.G. Vaccination. Dr. M. B. Paul, the Chest Physician, carried out Heaf Skin testing of child contacts of cases of Tuberculosis. He gave B.C.G. Vaccination to those with negative skin reactions. 8 were successfully vaccinated under this scheme in 1971.

School Children Scheme. The scheme commenced in 1963 with certain modifications has continued to work satisfactorily. All children of 11 years and over attending schools in Burton upon Trent were offered B.C.G. Vaccination. An excellent response was received from the parents, the vast majority of whom were very pleased to have their children vaccinated. Largely due to the excellent co-operation received from school staffs, and from the children themselves, no difficulty was experienced either in the preliminary skin test or the vaccination, and it is pleasing to note that no severe reactions were reported during the year under review. 898 children were given the Heaf Skin Test. As a result 49 children were found to have a positive reaction and 788 received B.C.G. vaccination.

#### 7. Deaths of Children of School Age.

Three children died in 1971.

- (1) Boy, aged 11 years .. I (a) Hydrocephalus (Congenital).
- (2) Boy, aged 6 years .. I (a) Ruptured liver and other injuries.
  - (b) Due to a road accident. Accidental Death.
- (3) Boy, aged 5 years .. I (a) Acute congestive cardiac failure.
  - (b) Transposition of great vessels.
  - (c) Congenital heart disease.
  - II Operation for Blalock Anastomosis.

#### 8. Minor Ailments.

The Authority maintains the School Clinic which is situated in a specially-adapted building at No. 32 Union Street. This building is used for School Medical purposes, and still contains the Speech Therapy Clinic although now a seperate building is used. Minor Ailments Clinics with a School Medical Officer and School Nurse in attendance are held daily, between 9 and 10 a.m., including those periods when schools are closed for holidays.

All Medical Records of School Children are kept at the School Clinic, and these are frequently referred to by Medical Officers when making special medical examination of children.

During 1971, there were 1,584 attendances at the Clinic for treatment of minor ailments, excluding attendances for disinfestation.

#### 9. Employment of School Children.

The following table shows the number of children examined and passed fit for employment.

|                    |         | Boys | Girls | Total |
|--------------------|---------|------|-------|-------|
| Newspaper Delivery | <br>    | 42   | 7     | 49    |
| Shop Assistants    | <br>    | 6    | 21    | 27    |
| Errand Boys        | <br>    | 4    | _     | 4     |
| Clerical           | <br>• • | _    | 1     | 1     |
|                    |         |      |       |       |
|                    |         | 52   | 29    | 81    |
|                    |         |      |       |       |

#### 10. School Meals Service and Free Milk Scheme.

The number of meals served was as follows:-

| Children<br>Staff and<br>Students | Helpers | •• | •• | •• | 691,661<br>82,917<br>— |
|-----------------------------------|---------|----|----|----|------------------------|
|                                   | Total   |    | •• | •• | 774,578                |

6,381 children were supplied with milk during the year.

#### 21 MEDICAL INSPECTION TABLES, 1971 Number of Children. Average number of children on the roll 10,836 Table 1 Medical Inspection of Pupils attending Maintained Primary and Secondary Schools A.—PERIODIC MEDICAL INSPECTIONS Age Groups inspected and Number of Pupils examined in each: Entrants 897 Leavers 850 Others 23 . . Total 1,770 **B.—OTHER INSPECTIONS** Number of Special Inspections 294 Number of Re-Inspections 1,581 Total 1,875 C.—PUPILS FOUND TO REQUIRE TREATMENT

| Age Groups Inspected (by year of birth) (1)                      | For defective vision (excluding squint)  (2)      | For any of the other conditions recorded in Table III (3)                       | Total<br>individual<br>pupils<br>(4)                           |
|--|---|---|--|
| 1967 and later 1966 1965 1964 1963 1962 1961 1960 1959 1958 1957 | 10<br>4<br>1<br>1<br>-<br>-<br>-<br>-<br>-<br>142 | 80<br>394<br>112<br>13<br>1<br>—<br>—<br>—<br>—<br>—<br>—<br>—<br>—<br>—<br>266 | 54<br>269<br>72<br>7<br>1<br>—<br>—<br>—<br>—<br>—<br>—<br>312 |
| TOTAL  | 158   | 866   | 715  |

# D.—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE 1 A

| Age Groups   | Number<br>of Pupils                                     | Physical Condition of Pupils<br>Inspected               |  |                |                         |  |
|--|---|---|--|----------------|-------------------------|--|
| Inspected (by years of birth)                                    |   | Satisfactory  |  | Unsatisfactory |                         |  |
| (1)  | Inspected (2)   | No. (3)   | % of Col. (2) (4)  | No.<br>(5)     | % of<br>Col. (2)<br>(6) |  |
| 1967 and later 1966 1965 1964 1963 1962 1961 1960 1959 1958 1957 | 121<br>629<br>147<br>16<br>3<br>2<br>1<br>1<br>—<br>850 | 121<br>629<br>147<br>16<br>3<br>2<br>1<br>1<br>—<br>850 | 100<br>100<br>100<br>100<br>100<br>100<br>100<br>100<br>———————— |                |                         |  |
| TOTAL  | 1770  | 1770  | 100  | _              | _                       |  |

Table II

Infestation with Vermin

| (i)   | Total number of individual examinations of pupils in Schools, by the School Nurses or other authorised persons      | 26,512 |
|-------|---|--------|
| (ii)  | Total number of individual pupils found to be infested  | 204    |
| (iii) | Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)   | 2      |
| (iv)  | Number of individual pupils in respect of whom Cleansing<br>Orders were issued (Section 54 (3) Education Act, 1944) |        |

## Table III Defects found by Medical Inspection

| Defect      | D.C. Di                        |             | F            | Periodic Ir   | rspections |                |
|-------------|--------------------------------|-------------|--------------|---------------|------------|----------------|
| Code<br>No. | Defect or Disease              |             | Entrants     | Leavers       | Others     | Total          |
| (1)         | (2)                            |             | (3)          | (4)           | (5)        | (6)            |
| 4           | Skin                           | T<br>O      | 11<br>34     | 1<br>31       | <u> </u>   | 12<br>66       |
| 5           | Eyes— (a) Vision               | T           | 1            | 4             | _          | 5              |
|             | (b) Squint                     | O<br>T      | 13           | 141           | 2          | 156<br>1       |
|             | (c) Other                      | O<br>T      | 27           | 19            | 2          | 48             |
| 6           | Ears— (a) Hearing              | O<br>T      | 5            | 27            | _          | 32<br>2        |
|             | (b) Otitis Media               | o<br>T      | 13           | 5             | 1          | 19             |
|             | (c) Other                      | Ô<br>T      | 12<br>1      | 6             | 1_         | 19<br>1        |
| 7           | Nose and Throat                | O<br>T      | 9<br>12      | 3             | 1          | 13<br>12       |
| 8           | Speech                         | O<br>T      | 119<br>13    | 42            | 2          | 163<br>13      |
| 9           | Lymphatic Glands               | O<br>T      | 78           | $\frac{7}{2}$ | <u>2</u>   | 87             |
| 10          | Heart                          | O<br>T<br>O | 35           | $\frac{2}{2}$ | =          | $\frac{37}{9}$ |
| 11          | Lungs                          | T           | 7<br>3<br>24 | $\frac{2}{3}$ |            | 9<br>3<br>27   |
| 12          | Developmental— (a) Hernia      | Т           | _            | _             | _          | : —            |
|             | (b) Other                      | O<br>T      | 6            | <u></u>       | _          | 6              |
| 13          | Orthopaedic—                   | O<br>T      | 36           | 4             | 1          | 41             |
|             | (a) Posture                    | T<br>O<br>T | 5<br>2<br>34 | 5             | _          | 10             |
|             | (b) Feet (c) Other             | O<br>T      | 34           | 7<br>1        | 2          | 2<br>43<br>1   |
| 14          | (c) Other Nervous System—      | Ô           | 16           | 16            | _          | 32             |
|             | (a) Epilepsy                   | T<br>O      | <u>-</u>     |               | _          | <u>-</u>       |
|             | (b) Other                      | T<br>O      | 17           | <u> </u>      | _          | 22             |
| 15          | Psychological— (a) Development | T           |              | _             | _          | <del>-</del>   |
|             | (b) Stability                  | O<br>T<br>O | 17           | —<br>46       | <u>-</u>   | 5<br>          |
| 16          | Abdomen                        | T           | 1            | <u></u><br>5  |            | 1 8 6          |
| 17          | Other                          | O<br>T<br>O | 3<br>6<br>32 | 24            | =          | 6<br>56        |

Table III (continued)

#### B.—SPECIAL INSPECTIONS

| Defect             |  | Special Inspections                               |
|--------------------|--|---|
| Code<br>No.<br>(1) | Defect or Disease (2)                        | Requiring Treatment (3) Requiring Observation (4) |
| 4                  | Skin   | _ 19  |
| 5                  | Eyes—(a) Vision (b) Squint (c) Other         | - 55<br>- 1<br>- 4                                |
| 6                  | Ears—(a) Hearing                             | - 15<br>- 3<br>                                   |
| 7                  | Nose and Throat                              | - 4   |
| 8                  | Speech                                       | - 18  |
| 9                  | Lymphatic Glands                             |   |
| 10                 | Heart  | - 2   |
| 11                 | Lungs  | - 2   |
| 12                 | Developmental— (a) Hernia (b) Other          | <u> </u>  |
| 13                 | Orthopaedic— (a) Posture (b) Feet (c) Other  | - 1<br>- 5<br>- 3                                 |
| 14                 | Nervous System—(a) Epilepsy (b) Other        |   |
| 15                 | Psychological— (a) Development (b) Stability | - 4<br>- 7  |
| 16                 | Abdomen                                      | - 4   |
| 17                 | Other  | 1 12  |

#### Table IV

#### Treatment Table

#### Group 1.—Eye Diseases, Defective Vision and Squint

|   |    | Number of cases known to have been dealt with |           |  |
|---|----|---|-----------|--|
|   |    | By the<br>Authority                           | Otherwise |  |
| External and other, excluding errors of refraction and squint Errors of refraction (including squint) |    | 1<br>197                                      | 19<br>40  |  |
| TOTAL   |    | 198   | 59        |  |
| Number of pupils for whom spectacles were prescribed  | •• | 94  | 18        |  |

#### Group 2.—Diseases and Defects of Ear, Nose and Throat

|   | Number of cases known to have been dealt with |                       |  |
|---|---|-----------------------|--|
|   | By the<br>Authority                           | Othe <b>rwise</b>     |  |
| Received operative treatment—  (a) for diseases of the ear  (b) for adenoids and chronic tonsillitis .  (c) for other nose and throat conditions .  Received other forms of treatment . | =   | 50<br>91<br>12<br>267 |  |
| TOTAL .  Total number of pupils in schools who are known to have been provided with hearing aids—  (a) in 1971  | =   | 4 5                   |  |

#### Group 3.—Orthopaedic and Postural Defects

|  | By the<br>Authority | Otherwise |
|--|---------------------|-----------|
| Number of pupils known to have been treated at clinics or out-patients departments . | . –                 | 436       |

#### Group 4.—Diseases of the Skin (excluding uncleanliness)

|   | Number of cases treated or<br>under treatment during the<br>year by the Authority |  |  |  |
|---|---|--|--|--|
| Ringworm— (i) Scalp (ii) Body   | _   |  |  |  |
| Scabies   | 106   |  |  |  |
| Impetigo  | 2   |  |  |  |
|   | 41  |  |  |  |
| TOTAL   | 149   |  |  |  |
| Group 5.—Child Guidance   | e Treatment   |  |  |  |
|   | 1   |  |  |  |
| Number of pupils treated at Child Guid-<br>ance Clinics under arrangements made         |   |  |  |  |
| by the Authority  | 15  |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
| Group 6.—Speech Ti  | nerapy  |  |  |  |
| Number of pupils treated by Speech Therapist under arrangements made by the Authority   |   |  |  |  |
| Group 7.—Other Treatm   | ents Given  |  |  |  |
| (a) Number of cases of miscellaneous  |   |  |  |  |
| minor ailments treated by the Authority   | 168   |  |  |  |
| (b) Pupils who received convalescent treatment under School Health Service arrangements | _   |  |  |  |
| (a) Parille rule president P.C.C. vaccination   | 788   |  |  |  |
|   | 700   |  |  |  |
| (d) Other than (a), (b) and (c) above   | _   |  |  |  |
|   |   |  |  |  |
| Total number of attendances at Authority's Minor Ailments Clinics                       | 1,584   |  |  |  |
| Total number of attendances including uncleanliness and Scabies                         | 4,571   |  |  |  |
|   |   |  |  |  |

## Table V Dental Inspection and Treatment

| Inspections  | Inspecte  | d   Requ  | f pupils<br>uiring<br>ment                  | Offered<br>treatment   |
|--|---|---|---|--|
| <ul> <li>(a) First inspection—School</li> <li>(b) First inspection—Clinic</li> <li>(c) Re-inspection—School or</li> </ul>  | 4,991<br>497  | )   | )78   | 3,078  |
| Clinic   | . 178   | 1   | 12  | 112  |
| Totals   | . 5,666   | 3,1   | .90   | 3,190  |
|  |   |   |   |  |
| Visits: (for treatment only)   | Ages<br>5 to 9  | Ages<br>10 to 14  | Ages<br>15 & ove                            | er Total   |
| First visit in the calendar year Subsequent Visits   | 1,110   | 662<br>1,521  | 85<br>249                                   | 1,857<br>3,892   |
| Total Visits   | 3,232   | 2,183   | 334   | 5,749  |
|  |   |   |   |  |
| Courses of Treatment Additional courses commenced Total courses commenced Courses completed  | 34<br>1,144<br>×  | 21<br>683<br>×  | 4<br>89<br>×                                | 59<br>1,916<br>1,975   |
| Courses completed  | ·· <u>'</u>   |   | ^_  | 1 1,915  |
| Trantmont  | I   |   | ·   | <del></del> _  |
| Fillings in permanent teeth Fillings in deciduous teeth Permanent teeth filled Deciduous teeth filled Permanent teeth extracted Deciduous teeth extracted General anaesthetics Emergencies | 920<br>1,148<br>791<br>1,468<br>52<br>915<br>377<br>101 | 1,132<br>2,111<br>1,010<br>224<br>174<br>287<br>163<br>77 | 237<br>×<br>209<br>×<br>35<br>×<br>13<br>13 | 2,289<br>3,259<br>2,010<br>1,692<br>261<br>1,202<br>553<br>191 |
| Number of Pupils X-Rayed Prophylaxis   | ••  | • •   |   | . 26   |
| Teeth otherwise conserved  |   | ••  | ••  | . 32   |
| Teeth root filled Inlays   |   | • •   | •• •  | $\frac{1}{1}$  |
| Crowns   | ••  | • •   | ••  | . 1  |
| Orthodontics:  |   |   |   | 10   |
| New cases commenced during year Cases completed during year  | ar  | • •   |   | . 12   |
| Cases discontinued during year   |   |   |   | . 3  |
| No. of removable appliances fitted No. of fixed appliances fitted  | 1   | • •   |   | . 23   |
| Pupils referred to Hospital Consu  | ltant   | • •   | ••  | . 15   |

**Dentures** 

| Number of pupils fitted with dentures for the first time:  (a) with full denture — 1 — 1 (b) with other dentures — 7 1 8 Total — 8 1 9 Total — 9 1 10 Anaesthetics  General Anaesthetics administered by Dental Officers DENTAL AUXILIARIES  Details of work carried out by Dental Auxiliaries and included main Form  Visits (for treatment only) | )                          |  |  |  |  |  |
|--|----------------------------|--|--|--|--|--|
| Number of dentures supplied (first or subsequent time) — 9 1 10  Anaesthetics General Anaesthetics administered by Dental Officers  DENTAL AUXILIARIES  Details of work carried out by Dental Auxiliaries and included main Form  Visits (for treatment only)  | _                          |  |  |  |  |  |
| (first or subsequent time) — 9 1 10  Anaesthetics General Anaesthetics administered by Dental Officers  DENTAL AUXILIARIES  Details of work carried out by Dental Auxiliaries and included main Form  Visits (for treatment only)  |                            |  |  |  |  |  |
| General Anaesthetics administered by Dental Officers  DENTAL AUXILIARIES  Details of work carried out by Dental Auxiliaries and included main Form  Visits (for treatment only)  | _                          |  |  |  |  |  |
| Details of work carried out by Dental Auxiliaries and included main Form  Visits (for treatment only)  |                            |  |  |  |  |  |
| Visits (for treatment only)  main Form   | 1 .                        |  |  |  |  |  |
|  | ı ın                       |  |  |  |  |  |
|  |                            |  |  |  |  |  |
| Ages Ages Ages 15 & over To  | tal                        |  |  |  |  |  |
| First visit in the calendar year 481 199 9 68 Subsequent visit 1,114 399 26 1,53   | 39<br>39                   |  |  |  |  |  |
| Total visits 1,595 598 35 2,22   | 28                         |  |  |  |  |  |
| Courses of Treatment:  |                            |  |  |  |  |  |
| Additional courses commenced 20 26 1   | 17<br>36<br>32             |  |  |  |  |  |
| Fillings in deciduous teeth  | 80<br>34<br>48<br>51<br>35 |  |  |  |  |  |
| Dental Hygienists  |                            |  |  |  |  |  |
| Details of work carried out by Dental Hygienists and included in main I  | orm                        |  |  |  |  |  |
| Visits (for treatment only)  Ages 5 to 9  Ages 10 to 14  Ages 15 & over To   | tal                        |  |  |  |  |  |
| First visit in the calendar year — — — — — — — — — — — — — — — — —   | -                          |  |  |  |  |  |
| Total visits   | -                          |  |  |  |  |  |
| Courses of Treatment: Additional courses commenced — — — — — — — — — — — — — — — — —   | -                          |  |  |  |  |  |
| Treatment: Prophylaxis   | -                          |  |  |  |  |  |



